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CONFIRMATION NO. 8120

SERIAL NUMBER 10796,817	FILING DATE 03/09/2004 RULE	CLASS 455	GROUP ART UNIT 2682	ATTORNEY DOCKET NO. 15264US02
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APPLICANTS

Ahmadreza Rofougaran, Marina Del Rey, CA;

Maryam Rofougaran, Rancho Palos Verdes, CA;
Shahla Khorram, Los Angeles, CA;

** CONTINUING DATA *****

This application is a CON of 09/691,630 10/18/2000 PAT 6,738,601
 which is a CON of 09/634,552 08/08/2000
 which claims benefit of 60/160,806 10/21/1999
 and claims benefit of 60/163,487 11/04/1999
 and claims benefit of 60/163,398 11/04/1999
 and claims benefit of 60/164,442 11/09/1999
 and claims benefit of 60/164,194 11/09/1999
 and claims benefit of 60/164,314 11/09/1999
 and claims benefit of 60/165,234 11/11/1999
 and claims benefit of 60/165,239 11/11/1999
 and claims benefit of 60/165,356 11/12/1999
 and claims benefit of 60/165,355 11/12/1999
 and claims benefit of 60/172,348 12/16/1999
 and claims benefit of 60/201,335 05/02/2000
 and claims benefit of 60/201,157 05/02/2000
 and claims benefit of 60/201,179 05/02/2000
 and claims benefit of 60/202,997 05/10/2000 *
 and claims benefit of 60/201,330 05/02/2000

(*)Data provided by applicant is not consistent with PTO records.

Yes MM

** FOREIGN APPLICATIONS *****

None MM

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/28/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 32	TOTAL CLAIMS 52	INDEPENDENT CLAIMS 7
Verified and Acknowledged	Examiner's Signature <i>MM</i> Initials <i>MM</i>				

ADDRESS

23446

MCANDREWS HELD & MALLOY, LTD

500 WEST MADISON STREET

SUITE 3400

CHICAGO , IL

60661

TITLE

Adaptive radio transceiver with floating MOSFET capacitors

FILING FEE RECEIVED 1690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit